

Alternatives to Abortion Invoice

<b>Contract #</b>	<u>CS170042004</u>	<b>Vendor Name:</b>	<u>The Haven of Grace</u>
<b>Vendor Number:</b>	<u>43161118100/MB00097920</u>	<b>Vendor Address:</b>	<u>1225 Warren</u>
			<u>St. Louis, MO 63106</u>

**Bill To:** Office of Administration  
Commissioner's Office  
201 W. Capitol Ave, Room 125  
Jefferson City, MO 65101

**Invoice Number:** HOG-2  
**Invoice Date:** 3/7/2017  
**Service Period:** March 1, 2017-March 31,2017

<u>Total Contracted Allocation</u>	<u>Prior Invoiced Total</u>	<u>Monthly Award Amount</u>
\$ 132,545.40	\$ 26,509.08	\$ 26,509.08
Quarterly expenditure adjustment:		\$ -
Total Due:		<b>\$ 26,509.08</b>
Allocation Remaining		\$ 79,527.24

**Signature:**  \_\_\_\_\_